LYMPHANGIOGRAPHY

Arbor Conference on Hodgkin's disease, this procedure may not be safely omitted.19

Lymphangiography is of great diagnostic value in detecting para-aortic, iliofemoral, and inguinal lymph node disease. In addition, lymphangiograms have been of great value to radiation therapists in planning the regions of treatment and in follow-up examinations to assess regression or recurrence.

REFERENCES

- 1. Sheehan R, Hreshehyshyn M, Lin RK, et al: The use of lymphangiography as a diagnostic tool. Radiology 76:417-453, 1961
- 2. Wallace S, Jackson L, Schaffer B, et al: Lymphangiograms: Their diagnostic and therapeutic potential. Radiology 76:179-199,
- 3. Viamonte M, Altman D, Parker R, et al: Radiographic-pathologic correlation in the interpretations and lymphangiograms. Radiology 80:903-916, 1963
- 4. Fraimow W, Wallace S, Lewis P, et al: Changes in pulmonary function due to lymphangiography. Radiology 85:231-241, 1965
- 5. Clouse ME, Grimsson JH, Wenhind DE: Complications following lymphangiography with particular reference to oil embolization. Am J Roentgenol 96:972-978, 1966
- 6. Bron KM, Baum J, Abrams HL: Oil embolization in lymphangiography, incidence, manifestations, mechanism. Radiology 80:194, 1963

- 7. Davidson JW: Lipid embolization to the brain following lymphangiography: case report and experimental study. Am J Roentgenol 105:763, 1969
- 8. Rosenberg SA, Kaplan HS: Hodgkin's disease and other malignant lymphomas. Calif Med 113:23-38, Oct, 1970

 9. Hass AC, Brunk SF, Gulesserian HP, et al: The value of laparotomy and splenectomy in malignant lymphoma. Radiology 101:157-165, 1971
- 10. Jelliffe AM, Millett YL, Marston JAP, et al: Laparotomy and splenectomy as routine investigations in the staging of Hodg-kin's disease before treatment. Clin Radiol 21:439-445, 1970
- 11. Lowenbraun S, Ramsey H, Sutherland J, et al: Diagnostic laparotomy and splenectomy for staging Hodgkin's disease. Ann Int Med 72:655-663, 1970

 12. Prosnitz LR, Nuland SB, Kligerman MM: Role of laparotomy and splenectomy in the management of Hodgkin's disease. Cancer 29:44-50, 1972
- 13. Ultman JE: Current status: the management of lymphoma. Sem Hematol 7:441-460, 1970
- 14. Zarembok I, Ramsey HE, Sutherland J, et al: Laparotomy and splenectomy in the staging of untreated patients with Hodg-kin's disease. Radiology 102:673-678, 1972
- 15. Tubiana M: Summary of informal discussion on stagi procedures in Hodgkin's disease. Cancer Res 31:1751-1754, 1971
- 16. Keller AR, Kaplan HS, Lukes RJ, et al: Correlation of histopathology with other prognostic indicators in Hodgkin's disease. Cancer 22:487-499, 1968
- 17. Woodard HQ, Holodny E: A summary of the data of mechanism on the destruction of human bone marrow. Physics Med Biol 5:57-59, 1960-1961
- 18. Pinsky SM, Hoffer PB, Turner DA, et al: Place of 67-allium in the staging of Hodgkin's disease. J Nucl Med 12:385,
- 19. Rosenberg SA, Boiron M, DeVita VT, et al: Report of the committee on Hodgkin's disease staging procedures. Cancer Res 31:1862-1863, 1971

Graves' Disease: Unusual Presenting Symptoms; Newer Diagnostic Tests

We [ophthalmologists] should tell other specialists who has Graves' disease, not the other way around. Ophthalmologists as a group should not be asking internists and neurologists and neurosurgeons if this patient with eye signs has Graves' disease. We should be telling them . . . Misleading eye signs are (1) isolated unilateral lid retraction . . . in the absence of the more usual concomitants of exophthalmos, congestion and the giveaway stuff that we're all used to seeing . . . ; (2) unilateral exophthalmos—probably a third if not two-fifths of patients with unilateral exophthalmos have Graves' disease . . . ; (3) apparently isolated myopathies [isolated superior rectus palsy, for example].

-HENRY J. L. VAN DYK, MD, Salt Lake City
Extracted from Audio-Digest Ophthalmology, Vol 11, No. 3, in the Audio-Digest Foundation's subscription series of taperecorded programs. For subscription information: 1930 Wilshire Blvd., Suite 700, Los Angeles, CA 90057.